



**NOTICE OF PRIVACY PRACTICES
PROCEDURES FOR PATIENT ACCESS TO HEALTH INFORMATION
LIFELINE CONNECTIONS, LLC**

POLICY 421A

To Request Records:

This request must be written on paper, state what you want copied, and be dated and signed by you. There is an agency form available for record requests that you may use. We may charge a nominal fee for the expense of copying records. We will respond to your written request within 30 days from the receipt of your request to photocopy your records; in some cases, we may extend this time period to 30 days—you will be notified in writing of an extension and be given the date the records will be available or when the request will be otherwise disposed of. You may make an appeal to the Department of Health and Human Services if we deny your request.

To Request Corrections:

Your request to make correction(s) must be in writing on paper, and state specifically what you believe is incorrect, and be dated and signed by you. We will respond to your written request within 10 days from the receipt of your written notification to review or correct your records; in some cases, we may extend this time period to 21 days—you will be notified in writing of an extension and be given the date the records will be available or when the request will be otherwise disposed.

If we agree with your request, you will be mailed notification within 10 days from the receipt of your written request and we will take action consistent with your request. You may request a review of a denial. This request must be in writing in paper, and state specifically what you want reviewed, and is dated and signed by you. Upon receipt of written notice for review of a denial, a licensed counselor, not involved directly in your care, shall conduct a review within 15 working days from receipt of the request for review, and mail you a written determination within 30 days from the date we received your request to review our denial. If we make a correction to your records per your request, others who may have received a copy of your record prior to the correction shall be sent a copy of the amendment within 15 days from the date the record(s) was corrected. If you do not submit a written statement of disagreement, if we should deny correcting your record, you may request in writing on paper that you want your written request to correct your record(s) included in any future disclosures specific to the record(s) in question, and we will include your request to correct your record(s) and our denial with any future disclosure we make of the records in question. If you have submitted a written disagreement and we have denied your request to correct your record(s), we will include your disagreement with any future disclosure of the protected information to which the disagreement is related. You may also make an appeal to the Department of Health and Human Services if we deny your request to review or amend your records.

To Request a Review of Your Records:

You may exercise this right by making a written request on paper stating that you want to review disclosures of your records. This request must be dated and signed by you. You may submit this request to your assigned counselor. In the absence of the counselor who provided you services, you may make this request to the Privacy Officer. Within 30 days of receipt of your written request, we will provide an appointment time to meet with you for this review. We may extend this 30-day period another 30 days if records have been archived or are at multiple sites.

If we deny or terminate an agreement with you, you will be mailed a written explanation for the basis of the denial within 10 working days from the denial or termination. You may also make an appeal to the Department of Health and Human Services if we deny your request.

Written requests as outlined above may be given directly to your counselor, or to the receptionist, who will give the request to your counselor. Written requests addressed to the Privacy Officer may be given to the receptionist who will give the request to the Privacy Officer. You may also mail a request to the attention of your counselor or Privacy Officer by sending your request to the following address:

Lifeline Connections
ATTN: (enter name of your counselor, or enter "Privacy Officer")
PO Box 1678
Vancouver WA 98668-1678

To Make a Complaint:

The complaint must be made within 180 days of when you knew or should have known that the act or omission complained of occurred.

The complaint must be written and include the specific acts(s) or omission(s) believed to be in violation of the applicable requirements of parts 160 or 164 of 45 CFR and include the date(s) when you believed they occurred. If you know the name of the Agency employee whom you believe violated the privacy rules, include his or her name. The written complaint must be dated and signed by you.

You may ask the receptionist for a complaint form and envelope and give your complete complaint, sealed in the envelope provided, to the receptionist, or you may instead mail your written complaint or form to the Privacy Officer using the address noted above.

Upon receipt of your written complaint, an investigation of your complaint will commence within five (5) working days. You will be mailed a written notification within 15 working days from the receipt of the complaint about the findings. You may make a written request to meet with the Privacy Officer or his/her designee and review the findings.